

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FOR COURT USE ONLY	
TELEPHONE NO.:			
ATTORNEY FOR (Name):			
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO</b>			
STREET ADDRESS: 216 Brookside Avenue			
CITY AND ZIP CODE: Redlands, CA 92373			
BRANCH NAME: Redlands District		FAX: (909) 798-8588	
TITLE OF CASE:		CASE NUMBER:	
<b>REQUEST TO APPEAR VIA VIDEOCONFERENCE</b>		HEARING DATE:	HEARING TIME:

NOTICE IS GIVEN THAT (name):

- ☐ requests to appear at the scheduled hearing date and time via videoconferencing (request must be submitted 5 court days prior to hearing) Note: Fees waived during pilot period, through September 30, 2008.
- ☐ SPECIAL REQUESTS OR ANTICIPATED PROBLEMS (specify):
- ☐ E-mail address (required):

#### CERTIFICATION

I certify that if the court grants the above-mentioned request, I acknowledge that my office must be properly equipped with an e-mail address, telephone, personal computer and camera compatible with the WebEx video conferencing service ([www.webex.com](http://www.webex.com)). All participating personnel in this request will be informed of and will abide by the provisions of California Rules of Court, the provisions of the court order, and any additional restrictions imposed by the court.

Date:

.....  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE)

#### CLERK'S CERTIFICATE

I hereby certify that I sent the Webex invitation to \_\_\_\_\_  
on \_\_\_\_\_.

DATE:

\_\_\_\_\_  
CLERK

**REQUEST TO APPEAR VIA VIDEOCONFERENCE**